

Amy Telnes Management Services

Debit Authorization Agreement

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL (ACH DEBITS)

OWNER NAME: _____

ASSOCIATION NAME: _____

Amount Authorized to Deduct: _____

Date to Deduct from Bank Account: _____

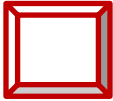
I (We) hereby authorize Amy Telnes Management Services, LLC. , to initiate **one debit entry** and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) () **Checking account** or () **Savings account** (select one) indicated below at the bank named below, herein after called DEPOSITORY, to credit and/or debit the same to such account.

BANK NAME: _____

STATE: _____ ZIP: _____

ROUTING NUMBER: _____

ACCOUNT NO: _____



OR CHECK HERE to use Bank Routing Number and Account Number already on file

ACCOUNT HOLDER NAME(S): _____

(Please Print)

Lot or Unit Number: _____

DATE: _____

SIGNED: _____ SIGNED: _____

This is a one time deduction for the amount listed to be deducted on the date specified.

No further deductions shall occur without further authorization.

Amy Telnes Management Services
500 N Lake Havasu Ave, Suite A104
Lake Havasu City, AZ 86403
Phone: (928) 505-1120
amy@atmshoa.com